Date and time	
Name of location	
Street address	
	, WI
Municipality name (indicate Town, Village or City, i.e., "Town of Leeds")	, ***
Order to Leave Polling Place, Cle	rk's Office, or Alternate Absentee Ballot Site
	name of observer
	organization, if a ny
	ered, pursuant to Wis. Stat. § 7.41(3), to leave the absentee ballot site immediately for the reason(s)
Signature of chief inspector	Signature of inspector
Printed name of chief inspector	Printed name of inspector

A copy of this document is required to be filed with the Government Accountability Board within 7 days of the incident.